

Health and Wellbeing Board

**Wednesday, 28th September,
2016
at 5.30 pm**

Council Chamber - Civic Centre

This meeting is open to the public

Members

Councillor Lewzey
Councillor Payne
Councillor Paffey
Councillor Shields (Chair)
Councillor Taggart

Rob Kurn – Healthwatch
Kim Drake – Service Director, Children and Families
Services
Derek Law – Interim Director, Housing Adults and
Communities
Dr B Coates – Acting Director of Public Health
Dr S Robinson – Clinical Commissioning Group
Dr E Mearns – NHS England Wessex Local Area Team

Contacts

Claire Heather
Senior Democratic Support Officer
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Email: claire.heather@southampton.gov.uk

BACKGROUND AND RELEVANT INFORMATION

Purpose of the Board

The purpose of the Southampton Health and Wellbeing Board is:

- To bring together Southampton City Council and key NHS commissioners to improve the health and wellbeing of citizens, thereby helping them live their lives to the full, and to reduce health inequalities;
- To ensure that all activity across partner organisations supports positive health outcomes for local people and keeps them safe.
- To hold partner organisations to account for the oversight of related commissioning strategies and plans.
- To have oversight of the environmental factors that impact on health, and to influence the City Council, its partners and Regulators to support a healthy environment for people who live and work in Southampton

Responsibilities

The Board is responsible for developing mechanisms to undertake the duties of the Health and Wellbeing Board, in particular

- Promoting joint commissioning and integrated delivery of services;
- Acting as the lead commissioning vehicle for designated service areas;
- Ensuring an up to date JSNA and other appropriate assessments are in place
- Ensuring the development of a Health and Wellbeing Strategy for Southampton and monitoring its delivery.
- Oversight and assessment of the effectiveness of local public involvement in health, public health and care services
- Ensuring the system for partnership working is working effectively between health and care services and systems, and the work of other partnerships which contribute to health and wellbeing outcomes for local people.
- Testing the local framework for commissioning for:
 - Health care
 - Social care
 - Public health services
 - Ensuring safety in improving health and wellbeing outcomes

Smoking policy – The Council operates a no-smoking policy in all civic buildings.

Mobile Telephones:- Please switch your mobile telephones to silent whilst in the meeting

Southampton City Council's Priorities:

- Jobs for local people
- Prevention and early intervention
- Protecting vulnerable people
- Affordable housing
- Services for all
- City pride
- A sustainable Council

Fire Procedure – In the event of a fire or other emergency, a continuous alarm will sound and you will be advised, by officers of the Council, of what action to take

Access – Access is available for disabled people. Please contact the Democratic Support Officer who will help to make any necessary arrangements.

Use of Social Media:- The Council supports the video or audio recording of meetings open to the public, for either live or subsequent broadcast. However, if, in the Chair's opinion, a person filming or recording a meeting or taking photographs is interrupting proceedings or causing a disturbance, under the Council's Standing Orders the person can be ordered to stop their activity, or to leave the meeting. By entering the meeting room you are consenting to being recorded and to the use of those images and recordings for broadcasting and or/training purposes. The meeting may be recorded by the press or members of the public. Any person or organisation filming, recording or broadcasting any meeting of the Council is responsible for any claims or other liability resulting from them doing so.

Details of the Council's Guidance on the recording of meetings is available on the Council's website.

Dates of Meetings: Municipal Year 2016/17

2016	2017
27 July	25 January
28 September	29 March
30 November	

CONDUCT OF MEETING

BUSINESS TO BE DISCUSSED

Only those items listed on the attached agenda may be considered at this meeting.

PROCEDURE / PUBLIC REPRESENTATIONS

At the discretion of the Chair, members of the public may address the meeting on any report included on the agenda in which they have a relevant interest. Any member of the public wishing to address the meeting should advise the Democratic Support Officer (DSO) whose contact details are on the front sheet of the agenda.

RULES OF PROCEDURE

The meeting is governed by the Executive Procedure Rules as set out in Part 4 of the Council's Constitution.

QUORUM

The minimum number of appointed Members required to be in attendance to hold the meeting is 3 who will include at least one Elected Member, a member from Health and Healthwatch.

DISCLOSURE OF INTERESTS

Members are required to disclose, in accordance with the Members' Code of Conduct, **both** the existence **and** nature of any "Disclosable Pecuniary Interest" or "Other Interest" they may have in relation to matters for consideration on this Agenda.

DISCLOSABLE PECUNIARY INTERESTS

A Member must regard himself or herself as having a Disclosable Pecuniary Interest in any matter that they or their spouse, partner, a person they are living with as husband or wife, or a person with whom they are living as if they were a civil partner in relation to:

(i) Any employment, office, trade, profession or vocation carried on for profit or gain.

(ii) Sponsorship:

Any payment or provision of any other financial benefit (other than from Southampton City Council) made or provided within the relevant period in respect of any expense incurred by you in carrying out duties as a member, or towards your election expenses. This includes any payment or financial benefit from a trade union within the meaning of the Trade Union and Labour Relations (Consolidation) Act 1992.

(iii) Any contract which is made between you / your spouse etc (or a body in which the you / your spouse etc has a beneficial interest) and Southampton City Council under which goods or services are to be provided or works are to be executed, and which has not been fully discharged.

(iv) Any beneficial interest in land which is within the area of Southampton.

(v) Any license (held alone or jointly with others) to occupy land in the area of Southampton for a month or longer.

(vi) Any tenancy where (to your knowledge) the landlord is Southampton City Council and the tenant is a body in which you / your spouse etc has a beneficial interests.

(vii) Any beneficial interest in securities of a body where that body (to your knowledge) has a place of business or land in the area of Southampton, and either:

- a) the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body, or
- b) if the share capital of that body is of more than one class, the total nominal value of the shares of any one class in which you / your spouse etc has a beneficial interest that exceeds one hundredth of the total issued share capital of that class

Other Interests

A Member must regard himself or herself as having an, 'Other Interest' in any membership of, or occupation of a position of general control or management in:

Any body to which they have been appointed or nominated by Southampton City Council

Any public authority or body exercising functions of a public nature

Any body directed to charitable purposes

Any body whose principal purpose includes the influence of public opinion or policy

Principles of Decision Making

All decisions of the Council will be made in accordance with the following principles:-

- proportionality (i.e. the action must be proportionate to the desired outcome);
- due consultation and the taking of professional advice from officers;
- respect for human rights;
- a presumption in favour of openness, accountability and transparency;
- setting out what options have been considered;
- setting out reasons for the decision; and
- clarity of aims and desired outcomes.

In exercising discretion, the decision maker must:

- understand the law that regulates the decision making power and gives effect to it. The decision-maker must direct itself properly in law;
- take into account all relevant matters (those matters which the law requires the authority as a matter of legal obligation to take into account);
- leave out of account irrelevant considerations;
- act for a proper purpose, exercising its powers for the public good;
- not reach a decision which no authority acting reasonably could reach, (also known as the "rationality" or "taking leave of your senses" principle);
- comply with the rule that local government finance is to be conducted on an annual basis. Save to the extent authorised by Parliament, 'live now, pay later' and forward funding are unlawful; and
- act with procedural propriety in accordance with the rules of fairness.

AGENDA

1 APOLOGIES AND CHANGES IN MEMBERSHIP (IF ANY)

To note any changes in membership of the Board made in accordance with Council Procedure Rule 4.3.

2 STATEMENT FROM THE CHAIR

3 DISCLOSURE OF PERSONAL AND PECUNIARY INTERESTS

In accordance with the Localism Act 2011, and the Council's Code of Conduct, Members to disclose any personal or pecuniary interests in any matter included on the agenda for this meeting.

NOTE: Members are reminded that, where applicable, they must complete the appropriate form recording details of any such interests and hand it to the Democratic Support Officer.

4 MINUTES OF THE PREVIOUS MEETING (INCLUDING MATTERS ARISING)

To approve and sign as a correct record the minutes of the meeting held on 27th July 2016 and to deal with any matters arising, attached.

5 HEALTHWATCH ANNUAL REPORT 2015/16

Report of Healthwatch Southampton Manager detailing the Healthwatch Annual Report 2015/16, attached.

6 CHILDREN AND YOUNG PEOPLE STRATEGY

Report of Service Director Children and Families providing an overview of the Children and Young People Strategy, attached.

7 SUSTAINABILITY AND TRANSFORMATION PLAN 2016

Report of Chief Officer, Southampton City Clinical Commissioning Group detailing the Sustainability and Transformation Plan 2016, attached.

Tuesday, 20 September 2016

Service Director, Legal and Governance

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HEALTH AND WELLBEING BOARD
MINUTES OF THE MEETING HELD ON 27 JULY 2016

Present: Councillors Lewzey, Dr Paffey, Payne (items 1-5 only), Taggart and Shields

Dr Sue Robinson, Bob Coates, Derek Law and Kim Drake

Apologies: Councillors Kurn

1. **APOLOGIES AND CHANGES IN MEMBERSHIP (IF ANY)**

Apologies for absence were submitted on behalf of Rob Kurn, Healthwatch. It was noted that Harry Dymond was attending in his place.

2. **ELECTION OF CHAIR AND VICE-CHAIR**

RESOLVED that Councillor Shields be elected as Chair and Dr Robinson be elected as Vice-Chair for the 2016/2017 Municipal Year.

3. **DISCLOSURE OF PERSONAL AND PECUNIARY INTERESTS**

Councillor Shields declared a personal interest in that he was a Council appointed representative of Solent NHS Trust and remained in the meeting and took part in the consideration and determinations of items on the agenda.

Councillor Lewzey declared a personal interest in that he was a Council appointed representative of Southern Health NHS Foundation Trust and remained in the meeting and took part in the consideration and determinations of items on the agenda.

Councillor Payne declared a personal interest in that he was a Council appointed representative of Solent NHS Trust and remained in the meeting and took part in the consideration and determinations of items on the agenda.

4. **MINUTES OF THE PREVIOUS MEETING (INCLUDING MATTERS ARISING)**

RESOLVED that the minutes of the meeting held on 23rd March 2016 be approved and signed as a correct record.

Matters Arising - Minute 37 – Headstart Strategy

The Committee noted that the Big Lottery Bid had not been successful. There had been feedback on key learning points which would be taken on board and re-channelled to see how this could be implemented into the Transformation Programme. The Committee formally acknowledged the hard work staff had contributed to the programme and placed on record their thanks.

5. **MENTAL HEALTH AND SUICIDE PREVENTION UPDATE**

The Committee received a presentation from Sally Denley, Public Health who provided an update on the work being undertaken on mental health and suicide prevention.

It was noted that the suicide audit recently undertaken had produced data that would be used to inform the suicide prevention plan and that the core aims would include:

- Reducing the risk of suicide in high risk groups;
- Tailoring approaches in specific groups to improve outcomes;
- Reducing the access to the means of suicide;
- Supporting media coverage
- Supporting research and data collection.

The Committee noted that loneliness was the biggest factor in Southampton based on evidence from suicide information and that the Overview and Scrutiny Committee had appointed a Scrutiny Inquiry to look into loneliness which would commence shortly.

6. **PREVENTION AND MANAGEMENT OF CHILDHOOD OBESITY**

The Committee considered the report of the Interim Director of Public Health detailing a proposal to develop a Childhood Obesity Prevention Plan and seeking collaboration across Council departments in the development and implementation of the Plan.

The Committee highlighted the impact of obesity and the importance of having the correct national strategy that schools responded to the issues of obesity and a local framework which worked through families to make a behaviour change environment.

RESOLVED

- (i) that the development of a city wide plan for the prevention and management of childhood obesity be endorsed and action taken should seek to achieve a reduction in health inequalities by targeting the most deprived communities;
- (ii) that that a city wide approach across a range of sectors to address wider determinants for childhood obesity be endorsed; and
- (iii) that a target to tackle childhood obesity as recommended by the workshop, to increase the proportion of healthy weight children in the City and reduce excess weight among children by 5% in 5 years be approved.

7. **PUBLIC HEALTH ANNUAL REPORT 2015: HEALTH AND WELLBEING BOARD RESPONSE**

The Committee received and noted the report of the Chair of the Health and Wellbeing Board detailing the Health and Wellbeing Board's response to the Public Health Annual Report 2015 recommendations.

8. **FAIRNESS COMMISSION: HEALTH AND WELLBEING BOARD RESPONSE**

The Committee received and noted the report of the Chair of Health and Wellbeing Board detailing the Health and Wellbeing Board's response to the Fairness Commission's recommendations.

9. **SUSTAINABILITY AND TRANSFORMATION PLAN 2016: UPDATE**

The Committee received and noted the report of the Chief Executive, Southampton City Clinical Commissioning Group detailing the draft submission of the Hampshire and Isle of Wight Sustainability and Transformation Plan which the Chair of the H&WBB had also submitted a letter in support of on behalf of the Board.

CHAIR

28TH SEPTEMBER 2016

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DECISION-MAKER:	HEALTH AND WELLBEING BOARD		
SUBJECT:	HEALTHWATCH SOUTHAMPTON ANNUAL REPORT/FUTURE STRATEGIC PRIORITIES/ONLINE FEEDBACK CENTRE		
DATE OF DECISION:	28 TH SEPTEMBER 2016		
REPORT OF:	HEALTHWATCH SOUTHAMPTON MANAGER		
<u>CONTACT DETAILS</u>			
AUTHOR:	Name:	Rob Kurn	Tel: 023 80216031
	E-mail:	R.Kurn@southamptonvs.org.uk	
STATEMENT OF CONFIDENTIALITY			
None.			

BRIEF SUMMARY

This report presents the Healthwatch Southampton Annual Report for 2015/16 to the Health and Wellbeing Board and outlines the Strategic Priorities set for the forward plan for 2016/17. At the meeting, the Healthwatch Southampton Manager will also demonstrate the online Healthwatch Southampton Public Feedback Centre.

RECOMMENDATIONS:

- (i) The Health and Wellbeing Board note the progress and actions in the Healthwatch Southampton Annual Report 2015/16
- (ii) The Health and Wellbeing Board consider the Strategic Priorities set for the coming period.
- (iii) The Health and Wellbeing note the additional value being delivered through the Feedback Centre in terms of public engagement and trend analysis.

REASONS FOR REPORT RECOMMENDATIONS

1. The Health and Wellbeing Board have a duty within the Council's Constitution to exercise any functions that are exercisable by the Authority to promote or advance health and wellbeing not otherwise reserved to Council or the Executive.

ALTERNATIVE OPTIONS CONSIDERED AND REJECTED

2. None.

DETAIL (Including consultation carried out)

Background

3. Healthwatch Southampton are required to review their activities against their strategic priorities and set these out in an annual report. This report presents the Healthwatch Southampton Annual Report for 2015/16, attached at Appendix 1.

4. Issues raised by the public have been prioritised by Healthwatch Southampton Strategic Group, and have formed the basis of a strategic work plan. Progress has been made according to the strategic work plan over the last year. These issues are further explored throughout this annual report and include:
 - Access to GP services
 - Adult Mental Health Services
 - Integration of Health and Social Care

5. Successful impacts have been achieved by:
 - Thorough community engagement
 - Building relationships with both commissioners and providers of health and social care
 - Engaging with high impact situations and inspections
 - Providing information and signposting people who use health and social care services
 - Engaging with and providing advocacy for people who use health and social care services
 - Influencing decision makers with evidence from local people

6. Particular successes have been achieved in:
 - Commissioning qualitative research about the experience of people with mental health problems in Southampton (page 33) and helping to organise a city wide Time to Change campaign to tackle stigma and discrimination (page 31).
 - Gaining national recognition for our work in changing policy around GP registration, including new guidance issued by the BMA (page31).
 - Working closely with Southampton CCG, as an independent body, to give feedback on the process of the Bitterne Walk-in Centre.

7. The Health and Wellbeing Board are requested to note the progress and actions in the Healthwatch Southampton Annual Report 2015/16.
The Health and Wellbeing Board are also requested to note that following a review Healthwatch Southampton has been awarded a two year contract extension until July 2018, with a 10% reduction in funding.

8. A public listening exercise was undertaken between January and June 2016, which, alongside other sources of data, have led to a reprioritisation of Healthwatch Southampton's Strategic Priorities:
 - Social Care
 - Primary Care
 - Mental Health

Golden thread: Integration and transformation

9. At the meeting, the Healthwatch Southampton Manager will also demonstrate the online Public Feedback Centre that has recently gone live.

RESOURCE IMPLICATIONS

Capital/Revenue

10. None. The activities outlined in this report are resourced through a commissioning arrangement with Southampton City Council.

Property/Other

11. None.

LEGAL IMPLICATIONS

Statutory power to undertake proposals in the report:

12. None.

Other Legal Implications:

13. None.

POLICY FRAMEWORK IMPLICATIONS

14. None.

KEY DECISION No

WARDS/COMMUNITIES AFFECTED:	All
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SUPPORTING DOCUMENTATION

Appendices

1.	Health Annual Report 2015/16
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Documents In Members' Rooms

1.	None
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Equality Impact Assessment

Do the implications/subject of the report require an Equality Impact Assessment (EIA) to be carried out.	No
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Other Background Documents

Equality Impact Assessment and Other Background documents available for inspection at:

Title of Background Paper(s)	Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)
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1.	None	
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Agenda Item 5

Appendix 1
healthwatch

Southampton

Your voice in improving
health and social care.

Healthwatch Southampton

Annual Report 2015/16

The year at a glance

Our website is regularly updated with news & information about our work & stories on health and social care.



Our volunteers help us with everything from community support to media tracking.



We've visited 86 voluntary sector groups, 24 statutory sector organisations, 2 universities and 1 college.



We have taken part in 8 [PLACE inspections](#) (Patient-Lead Assessments of the Care Environment).



We helped change national guidance to improve access to GP surgeries.



We've met thousands of local people at our community events.



Contents

Healthwatch Southampton	1
The year at a glance	2
Contents	3
Message from our Chair	4
Our Aims	7
Involving local people in our work.....	8
Demographics	10
Listening to people who use health and care services.....	12
What we've learnt from visiting services.....	14
PLACE inspections.....	15
Information, advice and signposting.....	16
CAB - Information, advice and signposting	19
seAp - Independent Health Complaints Advocacy	20
Learning disabilities	24
One Change.....	25
Working with young people	26
How we have made a difference	27
Our plans for next year	33
Expenditures	34
Contact us	38

Message from our Chair



The recent Health and Wellbeing Strategy consultation document for Southampton contained some worrying facts, especially that health inequalities are a big challenge in the city.

Men in the least deprived areas live 6.7 years longer than in the most deprived; for women the difference is 3.2 years and although life expectancy is increasing, the life expectancy for men overall is lower than the national average.

Southampton children and young people are more likely to be admitted to hospital for mental health conditions than the national average; more people are living with complex needs, with 86,000 residents having a long term condition; The older population (aged 65+) is expected to increase more rapidly than the overall population in the next five years, increasing demand for health and social care. Most worrying is that there is a significant funding gap for local health and social care services of £70 million over the next five years.

Given these and other facts it is not surprising that the year has been another busy one for Healthwatch Southampton. NHS and social care bodies have continued to engage with us in an attempt to fulfil their commitment to public engagement. As reported last year, Healthwatch Southampton is disproportionately busy for its size, as the City has a very large regional specialist teaching hospital.

It is also the headquarters of a community trust that serves Southampton, Portsmouth and large parts of southern Hampshire. In addition we have a large mental health hospital in the City.

‘Community engagement continues to be a most important part of our activity and our community worker has been very active, attending almost 100 meetings of voluntary sector groups as well as over 20 statutory organisations, meeting hundreds of local people at community events across the City and I congratulate him for his continued efforts.’

Hospitals are required each year to conduct PLACE (Patient Led Assessment of the Care Environment) inspections of their facilities and to invite Healthwatch to participate. As in previous years we have participated in these inspections at the General Hospital,

Western Hospital, Royal South Hants Hospital, Princess Anne hospital, the Countess Mountbatten Unit, the Southampton Treatment Centre and the Spire Hospital. Not only are these inspections valuable in providing us with an insight into the organisation, but they also help the providers realise the importance of local Healthwatch. Similarly, we have exercised our responsibility to comment on the quality accounts of University Hospital Southampton NHS Foundation Trust, Solent NHS Trust and Southern Health NHS Foundation Trust.

Demand for our signposting services has continued to grow and our contract with Southampton Citizens Advice Bureau means that members of the public have convenient access to signposting services with over 250 people contacting them during the year in addition to those dealt with at our own office.

‘It is pleasing to report that Healthwatch Southampton is now firmly established as a point of contact for many sections of the media. The local press regularly ask for comment about local and national matters of health and social care. We also engage regularly with local radio and TV.’

During the year Southampton City Clinical Commissioning Group (SCCCG) announced that it wished to close the remaining walk-in-centre in the City and undertook a public consultation. Healthwatch Southampton

evaluated the consultation process and wrote a report for the SCCC Board.

We were also very active in encouraging the SCCC to take a decisive decision to improve the situation relating to amputations as a result of diabetes.

‘You will read in the report that we have made very good progress with our work project to clarify the requirement for registration with a GP practice and also with our work on mental health in the City. The work on the Better Care programme is ongoing and we will continue to press for better public engagement in this important area.’

We have worked with University Hospital Southampton NHS Foundation Trust to improve the information available to patients and to improve the way that they communicate with patients and the public with sensory impairments. Details of these and other engagement activities can be found in the report.

During the year we began the process of recruiting volunteers to help us with our increasing workload and I am sure they will prove a great asset in conducting some of the surveys that we have in mind for the coming year.

I am pleased to report that our Annual General Meeting was a success and as well as producing the usual reports it gave the public an opportunity to tell us what they considered to be the issues requiring our attention in the coming year. Three

members of the Strategy Group were required to stand down and sadly two of them did not seek re-election but we were very pleased to welcome two new members to the Strategy Group.

I would like to take this opportunity to thank members of the Strategy Group for their dedication and commitment. I would also like to thank the Healthwatch Manager and his small but dedicated team for their conscientious efforts on behalf of the citizens of the City.

I believe this report will give you a flavour of our varied activities and I look forward to the next year which again promises to be a very challenging time for both health and social care in the City.

Harry Dymond

Harry Dymond, MBE
Healthwatch Southampton Chairperson

Our Aims

Government legislation sets out the purpose of local Healthwatch to carry out particular activities, which include:

- Promoting and supporting the involvement of local people in the commissioning, provision and scrutiny of local care services.
- Enabling local people to monitor the standard of provision of local care services and whether and how local care services could and ought to be improved.
- Obtaining the views of local people regarding their needs for, and experiences of, local care services and importantly to make these views known.
- Making reports and recommendations about how local care services could or ought to be improved. These should be directed to commissioners and providers of care services, and people responsible for managing or scrutinising local care services and shared with Healthwatch England.
- Providing advice and information about access to local care services so choices can be made about local care services.
- Formulating views on the standard of provision and whether and how the local care services could and ought to be improved; and sharing these views with Healthwatch England.
- Making recommendations to Healthwatch England to advise the Care Quality Commission to conduct special reviews or investigations (or, where the circumstances justify doing so, making

such recommendations direct to the CQC); and to make recommendations to Healthwatch England to publish reports about particular issues.

- Providing Healthwatch England with the intelligence and insight it needs to enable it to perform effectively.

Our vision is for high-quality health and social care services that are designed based upon strong user evidence and public feedback.

Healthwatch Southampton has elected and selected a Strategic Group, from its membership, made up of local people, local voluntary and community organisations, and nominated people to make up skills and equalities balance.

HWS Strategic Group is tasked with setting the strategic direction; identifying the operational priorities; and broadly directing the activities of Healthwatch Southampton whilst ensuring it has a strong independent voice. In particular the Strategic Group:

- Agree its vision, values and operating service ethos.
- Set its strategic and operational priorities; and direct its activities.
- Ensure the voice of consumers influences the shape of its services and activities.
- Monitor its performance, ensuring quality in all areas of its work.

Involving local people in our work

Over the past year Healthwatch Southampton has teamed up with other local Healthwatches in the Wessex region to collaborate and offer training in areas such as understanding the NHS and how to be a patient representative. Training sessions have been held in Southampton this year and patient representative opportunities have subsequently been offered to those who attended.



“Thank you very much for inviting me for the training session. It was both interesting and useful. I really enjoyed it. I would definitely like to be a part of any such events in future. Please keep me posted about further events and sessions.”

- Volunteer trainee at Healthwatch Southampton training course.
15/03/2016

“I am pleased I attended the training sessions and hope to contribute to improving Health & Social Care as a result.”

- Volunteer at HWS training course.
11/03/2016

Annual General Meeting 2016

In February we held our latest Annual General Meeting. This was well-attended and gave us the opportunity to present our work over the past year and to begin to set our future priorities. We also welcomed Anne Cato and Steve Beal, our new Strategic Group members, and thanked departing members Nadine Johnson and Jeff Page for their invaluable help.

“It was a really good event - very worthwhile.”

“Thank you for all your hard work. We need to keep on the pressure as services have been cut.”

“Harry, Rob and Sam’s contributions were informative and to the point.”

Decision making

Healthwatch Southampton is governed and steered by its Strategic Group which comprises of volunteer elected members and appointed members of voluntary sector organisations. The group meets monthly rotating between informal meetings and meetings in public.

Healthwatch volunteers are crucial to many aspects of our activities. This includes our Healthwatch Southampton Community Supporters who assist the Community Development Worker with outreach and are our eyes and ears in the community. We also have a Media Tracker who scours the media for health related stories and an Office Admin volunteer. Without the help of volunteers we would not be as visible, active and able to have achieved what we have. Thank you!

Celebrating 100 hours volunteering with Healthwatch

Congratulations to Nadine Johnson, Lesley Gilder and Harry Dymond for achieving over one hundred hours of volunteering time with Healthwatch

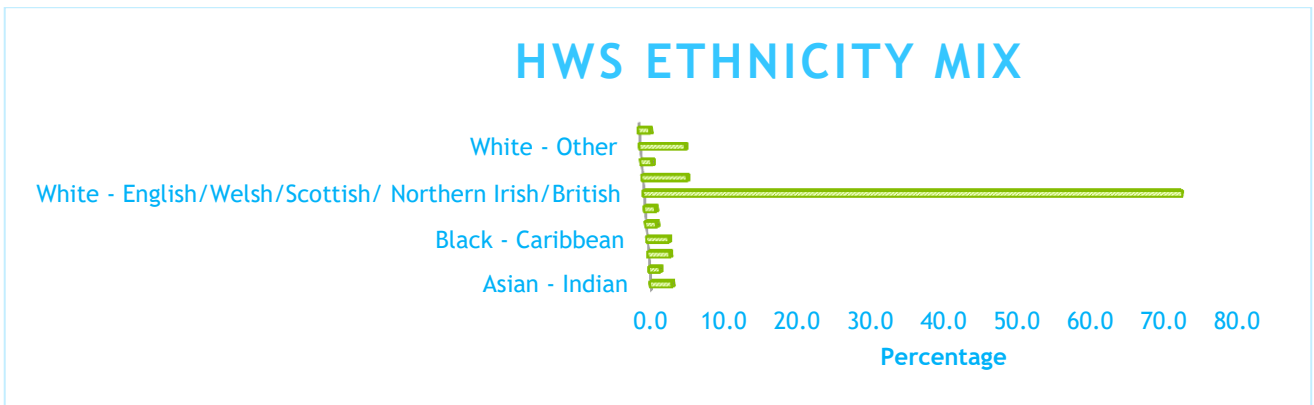
Southampton. As a gesture of gratitude they were nominated for Southampton Voluntary Services' Volunteer Certificate Scheme and had the chance to meet the Mayor, Councillor Linda Norris, along with other volunteers from across the city. Lesley and Harry are all members of the Healthwatch Southampton Strategic Group and their involvement continues to be crucial in representing and steering Healthwatch.



Demographics

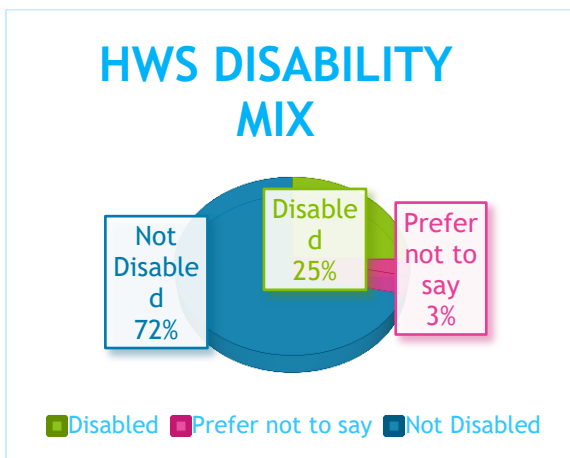
To ensure we are reaching all of Southampton’s diverse communities, particularly groups that are considered seldom heard, we monitor the protected characteristics of our membership in line with the Equalities Act 2010. Our data demonstrates that we have a higher proportion of Black and Minority Ethnic (BME) community members compared to that shown in the most recent census data for the City, and a quarter of our members report living with a disability. Over the next year we intend to have a drive on recruiting younger people (18-25), as these currently only make up 2% of members.

HWS Ethnicity Mix:



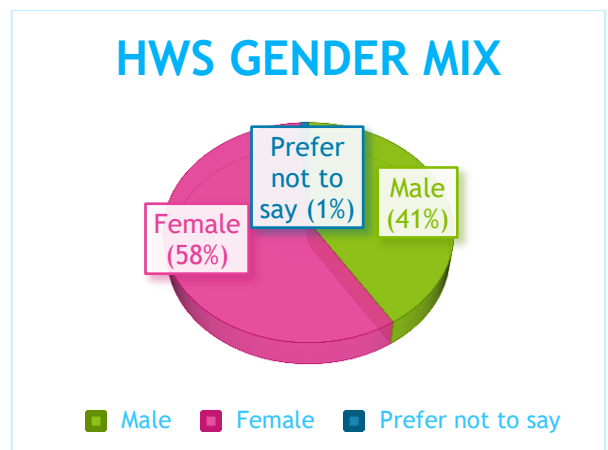
*HWS Protected Characteristics survey - Jan 2016

HWS Disability Mix



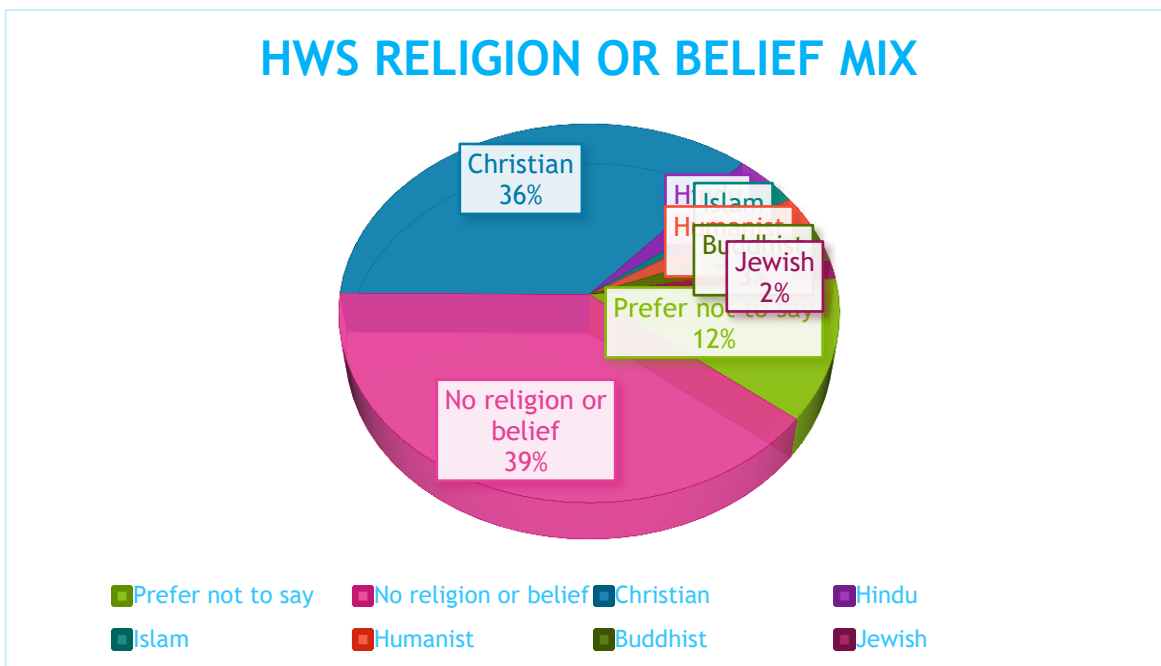
*HWS Protected Characteristics survey - Jan 2016

HWS Gender Mix



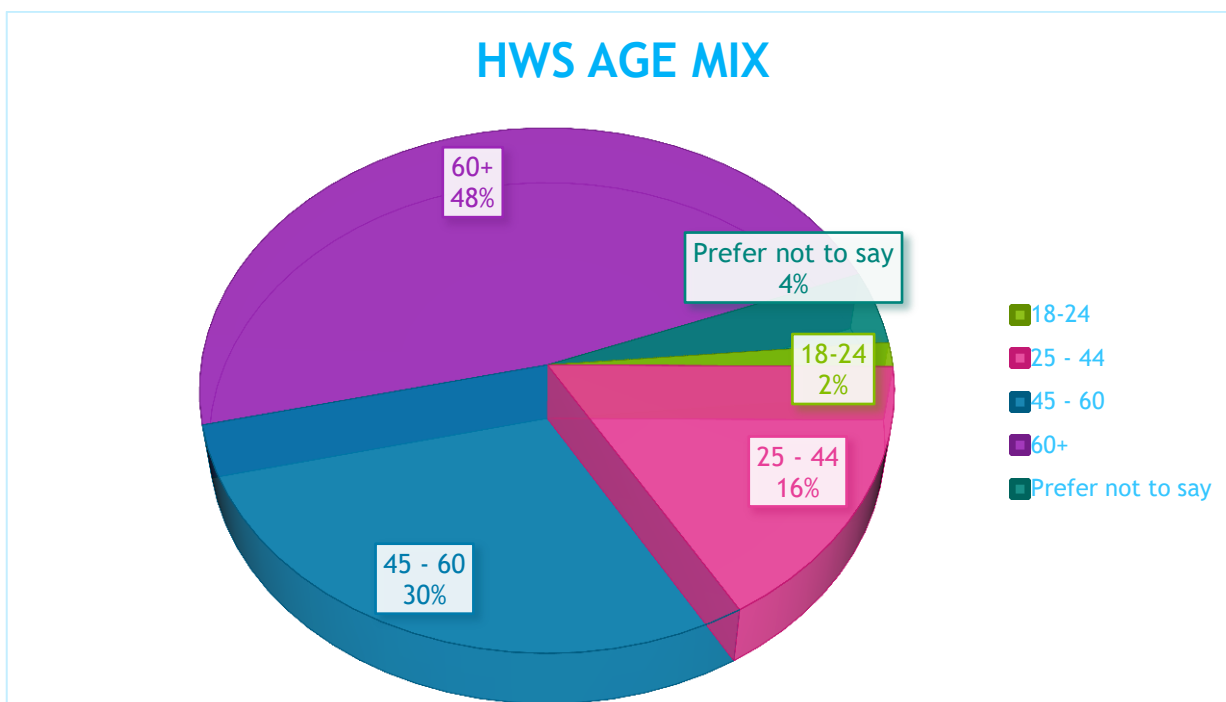
*HWS Protected Characteristics survey - Jan 2016

HWS Religion or belief Mix



*HWS Protected Characteristics survey - Jan 2016

HWS Age Mix



*HWS Protected Characteristics survey - Jan 2016

Listening to people who use health and care services

Gathering experiences and understanding people's needs

Healthwatch Southampton continues to collect experiences of health and care services by reaching out to the community of Southampton in a variety of ways. This is done primarily through face to face contact and outreach events and meetings with groups in the voluntary, statutory and educational sectors. The groups we have met with over the past year are listed below:

Voluntary sector (86)

West Itchen Community Trust x2
Carers in Southampton - General election hustings
Consult & Challenge x5
Older Persons and Disability Forum x2
Action on Hearing Loss
Memory Café x2
Time Bank
St Deny's Road Lunch Club x3
Healthwatch Wessex x3
Mencap AGM
Community Navigators, Personal Budgets - Spectrum
Southampton's City of Sanctuary Training Programme
Thornhill Community Health Group (TCHG)

SCA
Time to Change x6
Learning Disabilities Partnership Board
Alzheimer's Society x3
Busy People
The Encephalitis Society
Depression Alliance
Citizen's Advice Bureau
Ladies Walk Surgery
The Hub x2
Bipolar Support Group x2
THAWN x3
Mental Health Forum
Solent Mind - Improving mental health through peer support
MS Society x2
Macmillan coffee morning
Southampton Voluntary Services AGM, Friday Forum x5, Christmas party, Volunteer Co-ordinators Group x2
Different Strokes
Park Run
Autism Hampshire
Creative Options x3
SO18 Big Local
Volunteer Certificates Scheme
Arthritis Society
Stroke Association
Monty's
Parkinson's Society
TWICS

Unity 101

Wayne Howard Trust

Capable Creatures

Southern Health Budgets

Carers in Southampton - Carers Strategy

Autism Hampshire - coffee morning

Parent Support Link

Shopmobility

St Deny's Road mental health drop-in x2

Ladies Support Group (East)

Education (10)

University of Southampton Student Consultancy Scheme x3

University of Southampton - Student Volunteering Week

Solent University - Student Volunteering Week

Experts By Experience - University of Southampton x3

University of Southampton - 2nd and 3rd year nurses lecture

University of Southampton Business Fair

Stalls (14)

Adelaide Health Centre

West Quay x2

Creative Options Health Awareness Day

Diabetes Wellness Day

Mela

St James' Park x2

Carers in Southampton - St James' Road

Itchen College

World Mental Health Day - Antelope House

Carer's Week - Sainsbury's, Asda, Carer's Fair

Statutory (24)

Weston Lane Surgery

NHS Treatment Centre

Southern Health - Cannon House, College Keep, Antelope House

Better Care Community Solutions Group

Mental health steering groups x4

Mental Health Matters

Southampton Practice Manager's Forum x2

Solent NHS Trust x2

Equality Reference Group

Headstart

Southampton City Clinical Commissioning Group - Communications and Engagement meetings

South Central Ambulance Service x2

End of Life

Children & Adolescent Mental Health Services

NHS England (Wessex) Patient Experience Day

Chessel Practice

Southampton City Council - Day Services consultation

Bitterne Walk-In Centre - Focus group

The Grove Medical Practice

Southampton Information Directory

Sure Start Lordshill

“SO18 Big Local would like to say a very big thank you for all your support on Saturday at the Community Wellbeing Fun Day held at Townhill Junior School.”

- Jo

Proctor, SO18 Big Local, 20/10/16

What we've learnt from visiting services

University Hospitals Southampton Foundation Trust (UHS FT)

UHSFT has introduced an internal ward accreditation scheme. This scheme which was initiated a few years ago was developed by a steering group that included LINK (the forerunner of Healthwatch) members. The scheme requires a lay representative to be part of the inspection team and many of the lay inspectors are members of Healthwatch Southampton. Although not strictly Enter and View the feedback from these inspections is just as valuable and Healthwatch can suggest an inspection of a given ward or service. The outcome of these visits is reported to the management of the Trust and frequently leads to service improvement. Occasionally, a serious matter may be detected in which case the matter is reported to Healthwatch and this is taken up directly with the Trust.

One of these issues concerned patient boredom and the fact that TV is not available to all patients and that Wi-Fi is not accessible in many areas of the hospital. This was raised with the Director of Nursing and the medical director. As a result the Trust is re-examining its contract for radio, TV and Wi-Fi provision and is gradually expanding availability. The problem is particularly acute for those patients that live a long

distance from the hospital, especially those that do not live on the mainland. The voluntary services manager has initiated a programme to recruit volunteers that will visit these patients.

The Weston Lane Surgery - An example of listening to experiences through invitation

Healthwatch Southampton was invited by Weston Lane Surgery to spend the day listening to patients in their waiting room to ask about their experiences of the surgery. We gladly took up this opportunity and fed back results. Following this changes were made at the surgery including a more friendly approach to the reception area and community feel to the notice boards in the waiting room.

“Working alongside Healthwatch has helped broaden our thinking and understanding of where improvements to patient experience or engagement might be made.”

- Amanda Galea, Practice Manager,
The Weston Lane Surgery

PLACE inspections

Members of Healthwatch Southampton take part in Patient Led Assessments of the Care Environment (PLACE) assessments which require local people go into hospitals as part of teams to assess how the environment supports patient's privacy and dignity, food, cleanliness and general building maintenance. Members of Healthwatch Southampton have been involved in this process assessing buildings and wards run by NHS and private providers that cater for NHS patients including University Hospital Southampton, Solent NHS trust, the NHS Treatment Centre and Southern Health. Results will be published by NHS England later in the year.

- Princess Anne Hospital
- Southampton General Hospital
- Countess Mountbatten House
- The Western Hospital
- Royal South Hants Hospital
- The Southampton Treatment Centre (Care UK)
- The Spire Hospital
- Antelope House



“There are disabled parking spaces available at practice, but the markings have faded. We have discussed our patient’s views, and practice will be introducing new, clearly marked spaces, at the front of the building in due course.”

- Bitterne Surgery, 06/10/2015

Results

Results of these inspections have included improved signage at the Royal South Hants Hospital and in addition highlighting the negative impact of which a change in provision of catering has affected patients at Antelope House. This has been addressed by the Trust.

Information, advice and signposting

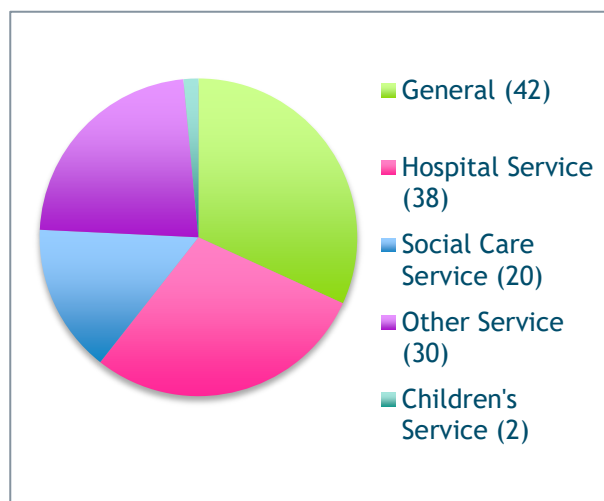
We are regularly contacted by members of the public with their experiences of health and social care services. Any complaints with NHS services are normally referred to seAp who provide our independent complaints advocacy service.

Almost 400 other enquiries and issues were dealt with by HWS staff based at the Voluntary Action Centre and through a contract with Southampton CAB which is reported overleaf.

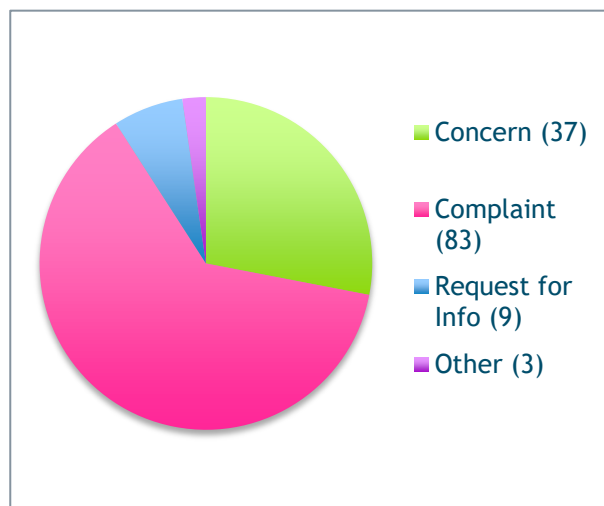
Examples of this type of work has included:

- Resolving a concern over respite care
- Liaising with relevant staff over care and mobility concerns
- Resolving the denial of access to treatment on the grounds of nationality
- Raising the problem of lack of wheelchairs at Southampton General Hospital
- Improving accessibility for people with disabilities at a GP surgery
- Helping to write a letter to social services

Cases by Service Type



Cases by Reason



“Thank you for your recent email regarding the daughter and her mother ... I can confirm that I have spoken to the daughter today to discuss the concerns and to support this to be resolved as soon as possible.”

- Southern Health NHS Foundation Trust 21/09/2015

Website

We continue to update and maintain the www.healthwatchsouthampton.co.uk website with regular newsletters and information about our work and what's going on in Southampton. The site has become a place to find out what the community offers in relation to health and social care services.

“While I was browsing through a number of health related websites, I came across the Healthwatch Southampton website and was very impressed by the information and resources that you have listed. I can't say thank you enough for all that you and your organization are doing for Southampton's health and social care services.”

- Ashley Brooks, Outreach Coordinator, Consumer Dangers, 07/12/2015

on from a similar one we have worked on at Weston Lane Surgery and is hopefully something we can help roll out across the city.



“As an outreach coordinator, I want to tell you how much I enjoyed your site. I think you do a great deal for your visitors and you present it all in a very positive way.”

- Laura Stone, Cerebral Palsy Symptoms, 26/10/2015

Community Notice Boards

Many thanks to Steve Beal, Healthwatch Southampton Community Supporter and Strategic Board member, for sparing his time and creative skill to help produce a community notice board at Ladies Walk Practice. The idea behind this is to provide a place for information about local groups, opportunities and events which can hopefully help with people's health. The board at Ladies Walk follows

Media involvement

Healthwatch Southampton is now firmly established as a point of contact for many sections of the media. The local press regularly ask for comment about local and national matters of health and social care. Recent examples include car parking charges, the junior doctor's dispute, GP appointment no-shows and healthy eating. We also engage regularly with local radio and TV.

An example of our media work includes writing to the Daily Echo in relation to a headline ‘Paranoid Schizophrenic’ stole £1,300 from neighbour’ (28.9.15). We said that people with medical conditions should not be labelled, which is something that is particularly prevalent in mental health. The Editor in Chief, Ian Murray, replied saying ‘I completely agree with you and wholeheartedly back your comment that someone should never be labelled by their condition... [and] will be taking this matter up with those concerned.’

opportunity to play his favourite Beatles and Elvis tracks, Sam and Alex discussed health and social care issues and the work of Healthwatch.



Healthwatch Southampton live on the radio

Thank you to Alex Ivancevic and everyone at Unity 101 for giving Sam Goold, HWS's Community Development Worker, the chance to go live on air during the Community Hour. Along with having the

“You have been a wonderful guest - very engaging, informative and inspiring. You did a great job promoting Healthwatch...”

- Alex Ivancevic, Unity 101 Radio,
05/01/2016



CAB - Information, advice and signposting

Partnership

Healthwatch Southampton continues to offer health and social care information and advice through its partnership with the local Citizen's Advice Bureau (CAB).

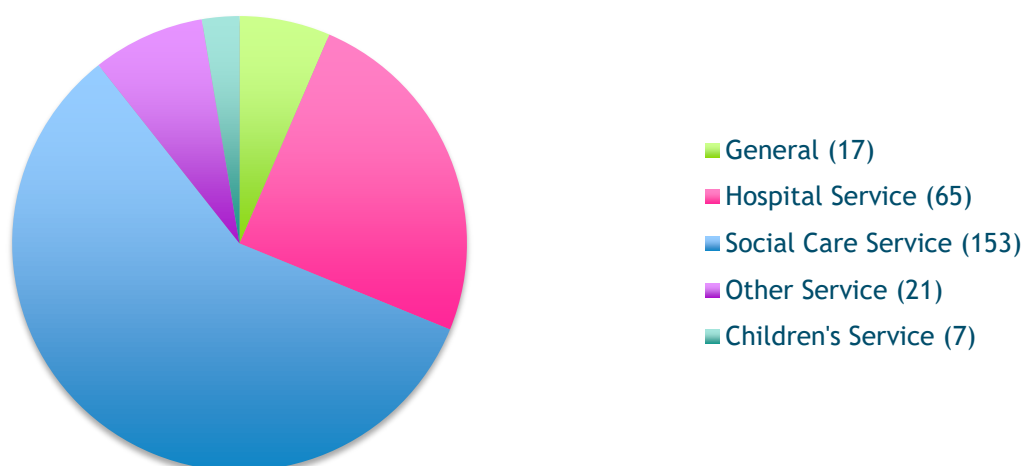
During 2015/16 the CAB handled 263 cases of which and over half related to social care services.

Results show that a large percentage of enquires relate to social care. This demonstrates that our partnership works to reach out to this area beyond health that otherwise could be missed.

Examples of the CAB's work:

- A client who uses a wheelchair could not access his dental practice. The receptionist suggested that he should find a different dental practice. The client wanted advice on how to complain. CAB referred to Healthwatch Southampton.
- A client in receipt of Income Support completed a form to qualify for a reduction in dental treatment but subsequently received a penalty notice. CAB resolved.

2015-2016 Cases

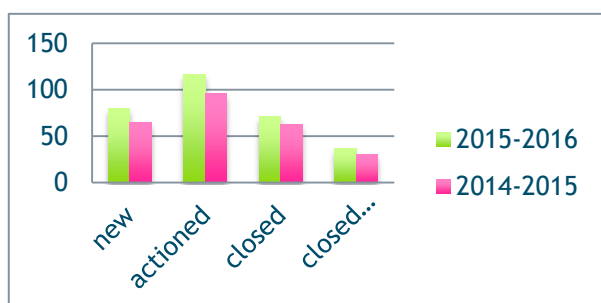


seAp - Independent Health Complaints Advocacy

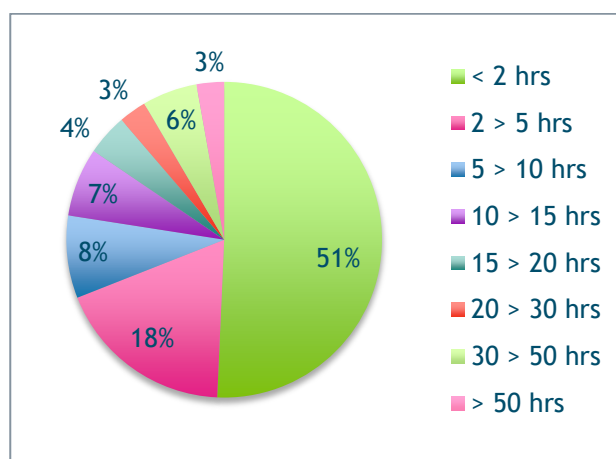
Service Overview:

Over the period 1 April 2015 to 31 March 2016, seAp Independent Health Complaints Advocacy in Southampton supported a total of 153 clients who required support and assistance with pursuing an NHS Health Complaint. This represents a 21.5% increase in total referrals from the previous year. We have supported 37 clients by use of the advocacy support workers and our self-help information pack.

We are pleased to report that there has been an increase from last year of 23% from Southampton residents accessing direct health complaints advocacy support and using our service, being supported by highly experienced QIA qualified advocates. This marked increase is extremely positive and we feel is of a direct result of the implementation of our networking strategy and demonstrates how we have been targeting our resources to those most in need of advocacy support.



Closed Case Time:



Southampton outcomes from statutory health complaints advocacy support:

Below are listed a few of the outcomes achieved by our Health Complaints advocacy team in Southampton over the past year:

University Hospital Southampton Trust

- Review of maternity services and service provision between Southampton General Hospital and Princess Anne Hospital
- Nurses have to undertake mandatory training where anonymised cases are used as learning tools. These training sessions take place once a month and are led by two consultants and include simulations to practice medical

procedures and effective communications with patients and families.

- Problem with Amoxicillin discussed with Wockhardt Ltd and reviewed.
- Ongoing audit of staff knowledge base of extravasation and the hospital's procedures.
- All learning points raised by the local resolution meetings will be raised with the individual hospital teams to raise this awareness.

Southern Health NHS Foundation Trust

Southern Health NHS Foundation Trust is making the following recommendations for improvement of service following learning outcomes and identified issues raised by advocacy support and/or interventions:

- Service-users to be involved in the discharge process and CPA process to promote a clear understanding.
- Where staff members are likely to be off sick or away from work for a period longer than 2 weeks, a caseload review is undertaken to ensure that service-users are re-allocated to another member of the team to ensure that their continuing needs are met.
- Where staff members are likely to be off sick or away from work for a period longer than 2 weeks and following a caseload review, service users will be notified in writing of the temporary plan of care.

- In cases of short term absences from work, each staff member will have a "buddy" to oversee the service user's care.
- Where care co-ordinators receive requests from service users in relation to psychological interventions, these will be taken to the team MDT for further discussion/exploration and decisions will be documented and service users notified of the outcome.
- Staff will receive further input and training with regard to formulating plans of care using the principles of recovery.
- Any entries made within a clinical record that offer a professional opinion will be substantiated with relevant clinical judgement and offer an explanation as to how this decision has been made.



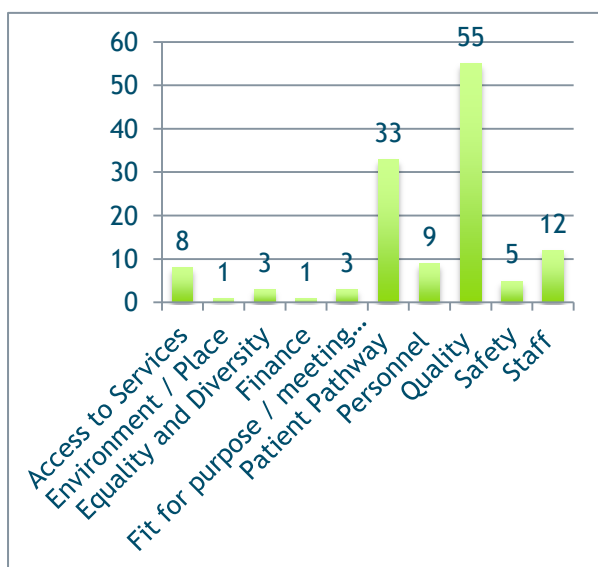
Issues and Trends within Southampton Health Complaints

seAp continue to collect and record evaluation data from clients accessing our service and pass this onto Healthwatch Southampton to assist in shaping services, identifying where the gaps are in service provision in the City and identifying themes and trends where things are going wrong to feed this back to HWS and Commissioners in order to be supportive in raising the quality of the services delivered.

The graph below indicates the topic/areas of concern raised over the previous year and the percentage against overall numbers.

42% of Health Complaint referrals received were to do with quality of service provided. This is followed by 26% of referrals being connected to the patient pathway.

These have then been broken down further to analyse the specific area or



subtopic. Against the previous year there has been a 46% increase in the rate of referrals connected to the quality and more specifically around quality of care given. This has been particularly around provision and quality of mental health services in the City.

Client Evaluation:

Through our client evaluation survey at the closure of cases, 75% of clients responded that they were very satisfied with the support provided by seAp.

seAp received a 100% positive YES response rate to the question, would you recommend seAp Health Complaint services to other people?

"I cannot thank you enough for all the help and support that you have given me in achieving this as I feel this is largely due to your intervention on my behalf."

- Client

"Thank you so much for your help. Perhaps you could help me with something else, I would like to get my medical records, x-rays, scans, etc. from both R S H and S G H how do I go about that? Many thanks again for your help,"

-Client

CASE STUDY

Issue: Client has severe mental health problems, with a history of repeated sections into acute psychiatric units.

CLIENT ISSUES & DESIRED OUTCOMES

Client felt that issues and concerns were being ignored by the Trust and in particular the Mental Health Team. Client wants the Trust and Mental Health Team to take the issues and concerns brought before them seriously and to answer and give explanations to those questions. Client feels that the Trust and Mental Health Team are ignoring this complaint because of client's mental health diagnosis.

WHAT DID THE ADVOCATE DO AND HOW?

Advocate acted on behalf of client with client's approval to act as a bridge between client and Trust. Advocate took on board client's issue and concerns and made sure they were translated into an understandable and focussed format. Advocate wrote letters on client's behalf and supported client at local resolution meeting.



WHAT WENT WELL?

Client felt that most issues and concerns had been addressed by the Trust and that client's voice had been heard and client's independence established.

WHAT WAS THE OUTCOME OF ADVOCACY SUPPORT?

The client was relatively satisfied with outcomes. Client felt that the Trust through the advocate had been made to take all concerns and issues seriously and client felt voice had been heard.

However, client was not satisfied with a piece of property going missing and the fact that the Trust had lost this property. Client is considering taking legal action.

Learning disabilities

Healthwatch Southampton seeks to involve people with learning disabilities in our work. We have recruited Matthew King, Co-Chair of the Southampton Learning Disability Partnership Board, as our Office Admin volunteer to feed in news from this community.

We have also worked with Busy People, a local learning disability group to engage feedback regarding services.

Results show better diet and exercise opportunities such as the gym, swimming more and walking the dog are needed.



Matthew King, Office Admin volunteer.

'I joined Healthwatch to help Healthwatch, get back into the workplace and gain paid employment. I do admin and I enjoy doing it!'

- Matthew King, Office Admin volunteer, Healthwatch Southampton.

Health services could be improved by reducing waiting times and providing regular health checks. A discussion was raised about health warning labels for sugar which was subsequently taken to the City's Director of Public Health.

At the Southampton Learning Disability Partnership Board answers to our 'One Change' survey showed that changes relating to diet were the most frequent, followed by exercise, smoking and alcohol, relaxation and better access to healthcare.



One Change

Over the past year Healthwatch Southampton has been engaging with the public using a simple statement which asks people for ‘One change that would improve my health...’

At each outreach session we hold, Healthwatch Southampton collects responses and publishes the findings on our website. ‘One Change’ gives the opportunity to discover individual matters that otherwise may be missed and helps us to take this matters further if required.

This has given us an insight into changes that people want to make to their health with the help of others, independently or both. Through speaking to over one

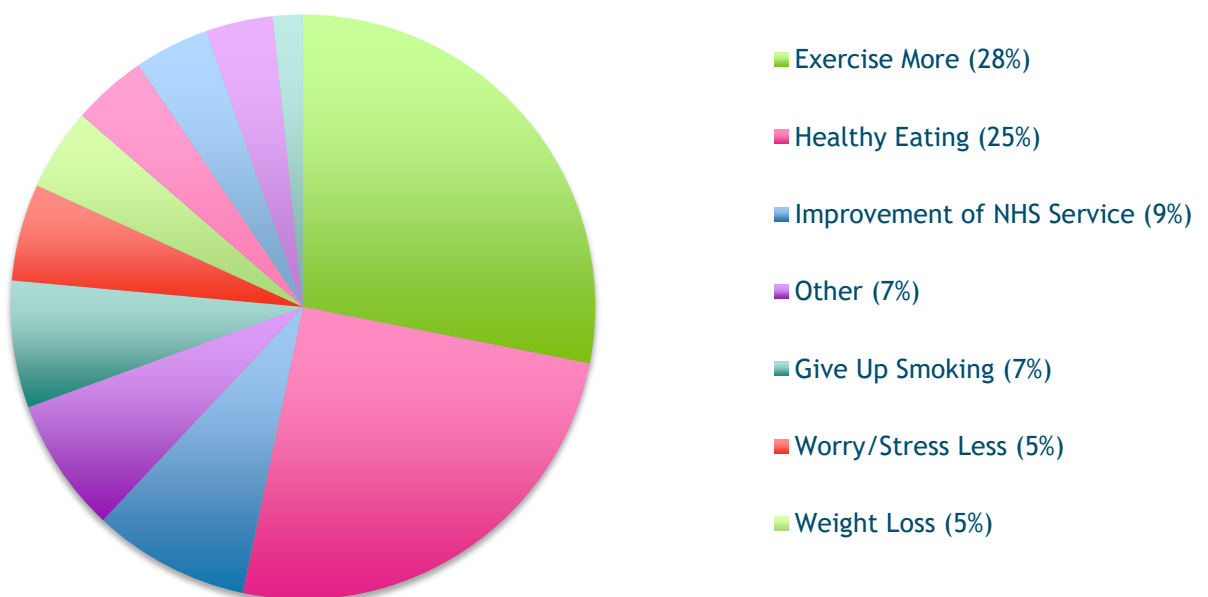
thousand people we have discovered there is a desire within the City for improved access to better healthcare services and a big emphasis on the importance of diet and exercise.

‘One Change’ has proved to be a simple method of engagement which we will seek to continue.

‘One Change continues to prove to be a great way of engaging with people and keeping the focus on how we can improve our health.’

- Sam Goold, Community Development Worker

‘One Change’ - Results so far



Working with young people

This year, Healthwatch Southampton teamed up with students from University of Southampton as part of the Student Consultancy Programme. We asked them to produce a report focusing on voluntary sector groups in the city that contribute towards health, looking at the benefits of groups and the challenges they face.

As part of Student Volunteering Week Healthwatch Southampton joined students at Solent University and the University of Southampton. We also took part in fairs to promote volunteering and had the chance to raise our profile, talk to students and explain the volunteer opportunities available.



Itchen College

We attended Itchen College Fresher's Fair in the autumn of 2015 and asked over 50 students to answer our 'One change' survey. The most popular answers were about getting more exercise, with access to gyms being asked for at cheaper prices. Answers around better diet were the next most popular. These and other replies were discussed at our AGM.

“I just wanted to email and say a massive thank you for speaking at the Student Consultancy Celebration last week. It was very well received and I appreciate the time you took to put it together.”

- Victoria Katon, Student Consultancy & Excel Internship Coordinator, University of Southampton, 10/03/2016

How we have made a difference

Bitterne Walk-In Centre

Healthwatch Southampton agreed to work with Southampton City Clinical Commissioning Group (CCG) in order to ensure that the citizens of Southampton and others affected by the proposal could have an effective voice in the consultation and to verify and comment on the processes and procedures used.

Our work with the CCG began before the publication of the consultation documents by examining the draft documentation and commenting on it to ensure that it met the guidance on the principles of consultation issued by the cabinet office in 2013. As well as the documentation itself we were careful to ensure that the consultation process also complied. At the conclusion of the consultation a report was sent to the CCG Board for them to make a decision. Healthwatch Southampton wrote to the CCG commenting on this report. The following response was received from a member of the public.

“Thank you for the email concerning the consultation of the walk in centre...I thought your response letter was very well written and voiced the concerns correctly.”

- Southampton resident, 29/09/2015

Anti-smoking advertising survey

During September we asked people via our website to vote for the most effective anti-smoking advert out of some we had selected. Behind this question was an aim to try and get a better understanding of what works and what doesn't work in terms of public health messages. 59 people replied and image showing the positive effects of stopping was voted in first place closely followed by perhaps the most shocking image of the consequences of smoking. Sam Goold, Healthwatch Community Development Worker, had the chance to talk more about this on local television as the survey coincided with new anti-smoking laws which make it illegal to smoke in vehicles with under 18s.



The winning entry: Stop Smoking Start Repairing

Diabetic related amputations

We were approached by members of the public and by Diabetes UK expressing concern that Southampton had a very poor record of amputations as a result of diabetes. Previously, LINK members had been actively involved with the previous Strategic Health Authority in developing a code of good practice for the care of diabetic feet. We therefore raised this with both the provider Trust and with the CCG to determine if there was a Multi-disciplinary team and if not whether one was to be established. After an exchange of correspondence and a few meetings we were informed that it was the intention of the CCG to implement the NICE guidelines in full in 2016. Knowing that Southampton Health Overview and Scrutiny Committee (HOSP) had also been approached the Healthwatch Chairman wrote to the Chair of HOSP:

‘...I wrote to the CCG on behalf of Healthwatch Southampton expressing concern at the position of Southampton in respect of the number of diabetic related amputations. I am pleased that the CCG has now accepted this as an issue and have agreed to implement the full NICE guidance.’

- Harry Dymond, MBE, Chair,
Healthwatch Southampton

Working with other organisations

Improving the experience for those with sensory loss.

Healthwatch Southampton raised the issue of patients with hearing loss with UHS FT and as a result the Trust made the improvement of patient experience for all patients with sensory loss a topic of the quality improvement framework for 2015/16. The Trust then established a small working group to advise the Quality Governance steering Group of the hospital and two members of the Healthwatch Strategy Group were invited to be members. Several recommendations have already been made and some action already taken. It is planned that the hospital will develop a ‘care card’ which will identify patients with a special need before arriving at hospital; this will include patients with any form of special need. The details have yet to be agreed but it is hoped that the process of identifying patients will begin when they first receive the hospital letter. All leaflets are to be reviewed and where possible produced in typeface and colour suitable for those with sight loss. Hearing loops will be inspected and other locations requiring loops will be identified. Leaflets will be available in Braille and other languages where possible. Audible and visual signs will be used to signify when outpatients are required. There is more work to do and the group is realistic about the costs involved but nevertheless good progress is being made.

Patient information Leaflets

UHS FT had a leaflet entitled ‘Your stay in hospital’ which contained a considerable amount of detail and useful information but some of it was out of date. Healthwatch Southampton agreed to work with UHS FT to produce a revised version. The booklet has been updated and now contains a section on obtaining independent help via Healthwatch.



Provision of a regional vascular service for Southern Hampshire

For some years we have been pursuing this topic with NHS England in order to establish a single centre of excellence for those requiring vascular surgery. Progress has finally been made this year and we have been actively involved as members of the implementation board and more recently as members of the communication working group

Working with the Governors of the Hospital Trust

The Council of Governors of UHS FT were concerned that they were not providing sufficient patient feedback to their meeting. Not wishing to duplicate but wishing to improve the Council invited

Healthwatch to explain its operation to the Council of Governors’ meeting. This has been followed up by more detailed discussions to assist the Governors in their work

Carers Week

In June Healthwatch Southampton supported Carer’s Week to highlight the role of carers and the support available. We collaborated with Carers in Southampton and spent the week in supermarkets and at a carer’s fayre. This gave us the chance not just to promote help available but to listen to the public about their caring roles.

“Without your support and energy carers may have missed out and potentially not known of the assistance available to them, I hope we can continue to maintain the relationship and work together again.”

- Philip Lee, Project Manager, Carers in Southampton

Experts By Experience

Throughout the year Healthwatch Southampton has supported and attended the University of Southampton’s Experts by Experience Group which is part of the Health Sciences faculty. The role of this group is to: ‘... offer a different approach to health by bringing in the direct personal experiences of patients and carers. We do not aim to replicate the

work of staff or students but to use our experiences and views to support them in improving teaching and health outcomes.’ The group meets monthly and offers the chance for staff and students to draw upon its knowledge in the course of their teaching and learning. As the university trains many nurses and other medical professionals, Healthwatch Southampton believes it is important that we can play a part in helping inform health and social care staff of tomorrow.

"I am delighted to attach the recently approved Patient and Public Involvement strategy document. It is now an official Faculty document and I wanted to take this opportunity to thank you for all your hard work in contributing, moulding and co-producing its contents."

- University of Southampton



Alzheimer's Society

Healthwatch Southampton was contacted initially by a lady diagnosed with dementia who attended a local Alzheimer's Society's art group because of the news that the group was closing. The Alzheimer's Society's Group Co-ordinator said that despite efforts to market and promote their groups - to staff along the dementia pathway, to the NHS generally and beyond - a lack of referrals meant that some groups were unviable. Healthwatch Southampton visited these groups, which were clearly valued by those who attended, and subsequently raised the matter with health professionals in an effort to improve the referral rates. As a result, the issue of improving referrals to voluntary sector groups is now firmly on the agenda of local health commissioners and trusts.

"Thank you so very much for yesterday. It was a great relief for me personally to be able to talk so openly about the challenges we face. Thank you for your understanding and patience whilst listening so deeply to the concerns..."

- Group Coordinator, The Alzheimer's Society, 22/07/2015

Mental health

Healthwatch Southampton supported the 'Time to Change' campaign which involved a number of events in October 2015 around World Mental Health Day. The campaign aims to end stigma and discrimination in mental health which is often a bigger barrier for people trying to recover from a mental health problem than the illness itself. Healthwatch Southampton staff and volunteers were involved throughout, including the fantastic Park Run and a Pop-up Village in Guildhall Square. These efforts not only raised awareness but are leading to more joint working and improvements to mental health services in the city.

“Thank you for all that you and other SVS organisations have done on the Anti-Stigma in Mental Health Campaign. Your contributions to the leadership and delivery of the campaign have been a big reason for its success. I am especially grateful for the input that you gave to the Council meeting, when the whole group of councillors were much affected by your deputation.”

- Councillor Paul Lewzey, Southampton City Council, 20/10/2015

GP Registration

In November 2015 Healthwatch Southampton welcomed the new British Medical Association guidance on patient registration for GP practices. This followed work over the previous year highlighting the problem that people were unable to register at GP practices due not having identity or proof of address.



Matt Brompton, who has now been able to register at his GP surgery thanks to this change.

The barrier of not being able to register with a GP practice because of not having proof of identity or address was raised with us almost two years ago. There were many examples of people being turned away and Healthwatch Southampton pursued this tirelessly to achieve change.

The new guidance says:

‘There is no contractual duty to seek evidence of identity or immigration status or proof of address. Therefore practices should not refuse registration on the grounds that a patient is unable to produce such evidence.’ - BMA, 4th November 2015

Thanks to the work of Healthwatch Southampton to change national guidance, local residents such as Matt Brompton are now registered with a GP Surgery.

‘If you’re not sure [on national guidance] there are plenty of organisations around like Healthwatch who can really guide you.’

- Matt Brompton, newly registered at his GP surgery



Rob Kurn, Healthwatch Manager

doing so across England. Our thanks go out to everyone who helped and spread the word that you should not be refused registration with a GP practice if you don’t have proof of identity or address.”

Rob Kurn, Manager of Healthwatch Southampton, said:

“We welcome recent guidance by the BMA and NHS England which says practices should not refuse registration on the grounds that a patient is unable to produce such evidence. This change is already having a positive impact for people accessing health services in Southampton and we look forward to it

“Great work Southampton!!”

- Steve Taylor, Manager, Healthwatch Hampshire

healthwatch



Our plans for next year

Future priorities

We are now looking to focus on future work priorities over the next 18 months and would continue to welcome your views.

At our AGM and some areas suggested included:

- Social isolation
- Hospital discharge
- Returning to work post serious illness
- Service integration
- Communication requirements particularly before consultations
- Keeping the focus on mental health

If you have ideas about what we should focus on we would love to hear from you. We will do our best to include them in the year ahead.

Mental health research project

We have worked closely with Southampton University to gain ethics committee approval to undertake a piece of qualitative research exploring the experiences of people living with mental health conditions in Southampton.

This will be published later in the year and we are keen to better understand the

path of people's recovery journeys, things that have helped and their experiences of local services. This research will be shared with commissioners and services, and will feed into local efforts to improve our mental health system.

'One Change'

Healthwatch Southampton will continue its 'One Change' campaign that seeks to engage the public to suggest 'One change that would improve my health...'

This data will continue to be used to advocate for improvements to health and social care.

New website

Our new and updated website will be launched in autumn 2016. This will include a full directory of local health and social care services, with a feedback facility to enable the public to rate local services and leave comments.

This will enable Healthwatch Southampton to cast its net far wider and digitally reach new public audiences, allowing us to build a fuller picture of health and social care services in Southampton.

Expenditures

Healthwatch Year ending 31st March 2016

	YEAR END 2016
Staff costs & salaries	£70,083.60
Staff & Volunteer Costs - Training/recruitment	£962.10
Staff & Volunteer Travel	2,169.93
Service Management & Governance costs	4,100.00
Community Research & Engagement costs	15,698.00
Information & Advice	5,200.00
Evidence, insight and influencing	7,119.00
NHS Complaint advocacy	50,000.00
Other - Translation/marketing etc	3,040.40
Management Charge	24,560.72
Total	182,933.75

	BUDGETED	ACTUAL	DIFFERENCE
Southampton UA	To date	To date	
Contract value	£50,000	£50,000	0
Staff costs	36,900	36,615	285
Staff expenses, training and recruitment	3,059	2,473	586
Premises and office supplies	535	581	-46
ICT costs	1,505	852	652
Volunteers, publicity and other costs	1,343	172	1,171
Support services	6,658	9,307	-2,649
Transfers	0	0	0
Total cost	50,000	50,000	0
Net surplus/(deficit)	0	0	0

CAB

YEAR END 2016	
Funding received	£5,200
Expenditures	
Staffing and management £3,000	£3,000
Training £1,200	£1,200
Volunteer expenses £220	£220
Apportionment of overheads £780	£780
Total expenditure	£5,200

Comments about us from health professionals

“Very many thanks for reviewing so thoroughly, your helpful comments and ‘fresh eyes ‘approach... When the consultation has closed I will review all feedback, decide on final amendments and feedback via the patient experience forum.”

- Ann Rice, Solent NHS Trust

“Thank you for the feedback that you have provided from your time at College Keep today - your assistance has been greatly appreciated throughout the engagement period.”

- Amanda Luker, Commissioner, Integrated Commissioning Unit

Comments from volunteers

“Thank you once again for welcoming me to the Healthwatch meeting this evening. I have greatly enjoyed being part of an active, vision centred organisation which is so filled with enthusiasm by yourself, Rob and Jeannette. Thank you for involving me,

overseeing my contributions, and creating a good open working relationship.”

- Healthwatch Volunteer, 30/06/2015

“Working with Healthwatch was a great learning experience and it is proving very helpful in my Masters study ... Once again thank you very much. Really looking forward for working with you in future.”

- Healthwatch volunteer, 24/09/2015

Comments from the public

“...it was great to meet - really good to hear more about Healthwatch. Definitely will be in touch in the future.”

- Polly Allen, Monty's Community Hub Team Leader, 27/11/2015

“Also thank you for sparing your valuable time to see me yesterday. It was truly inspiring to hear about your own journey to achieve the national agreement with GP's to accept patients without ID.”

- Ramesh Fernando, 12/02/2016

“I really appreciate your time and the interview was great.”

- Kara Digby, Solent University,
04/11/2015

“Thank you for your visit to Chamberlayne School drop in, very much appreciated.”

- Kathryn Evans, Community Access Officer, Autism Hampshire, 11/03/2016

“Thanks so much for meeting up with me, you are a truly inspirational guy...Thank you so much for your advice, I think it has really changed my direction for the better.”

- Occupational Health student, University of Southampton, 31/07/2015

“There are disabled parking spaces available at practice, but the markings have faded. We have discussed our patient’s views, and practice will be introducing new, clearly marked spaces, at the front of the building in due course.”

- Bitterne Surgery, 06/10/2015

“Dear JE, Thank you so much for your help. Perhaps you could help me with something else, I would like to get my medical records, x-rays, scans, etc. from both R S H and S G H how do I go about that? Many thanks again for your help,”

“As an outreach coordinator, I want to tell you how much I enjoyed your site. I think you do a great deal for your visitors and you present it all in a very positive way.”

- Laura Stone, Cerebral Palsy Symptoms, 26/10/2015

“I just wanted to thank you again for your time last month. We have revised the draft questions to incorporate your feedback and also taken the updated version through a small patient engagement group for additional comments, and are taking it to our shadow board of governors this week for approval.”

- Claire Budden, Senior Programme Manager, Solent NHS Trust, 02/11/2015

Contact us

Get in touch

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We will be making this annual report publicly available by 30th June 2016 by publishing it on our website and circulating it to Healthwatch England, CQC, NHS England, Clinical Commissioning Group/s, Overview and Scrutiny Committee/s, and our local authority.

We confirm that we are using the Healthwatch Trademark (which covers the logo and Healthwatch brand) when undertaking work on our statutory activities as covered by the licence agreement.

If you require this report in an alternative format please contact us at the address above.

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DECISION-MAKER:	HEALTH AND WELLBEING BOARD		
SUBJECT:	Children and Young People’s Strategy		
DATE OF DECISION:	28 September 2016		
REPORT OF:	Kim Drake, Service Director – Children and Families Services, Southampton City Council		
<u>CONTACT DETAILS</u>			
AUTHOR	Name:	Felicity Ridgway, Policy Manager, Southampton City Council	Tel: 02380 833310
	E-mail:	felicity.ridgway@southampton.gov.uk	
STATEMENT OF CONFIDENTIALITY			
NOT APPLICABLE			

BRIEF SUMMARY

Southampton City Council is working with partners and stakeholders to develop a new Children and Young People’s Strategy for the City. This strategy will set out a high level vision for children and young people in the city, and establish the direction of travel for the key partners to 2020.

RECOMMENDATIONS:

- (i) The Health and Wellbeing Board provide feedback on the initial development of the Children and Young People’s Strategy.
- (ii) The Health and Wellbeing Board identify key partners and contacts to engage and provide further input into the development and delivery of the strategy.

REASONS FOR REPORT RECOMMENDATIONS

1. The new Southampton Children and Young People’s Strategy will include actions and measures relating to the health and wellbeing of children and young people in the city. The Health and Wellbeing Board is therefore recognised as a key partner in the development and delivery of the strategy.

ALTERNATIVE OPTIONS CONSIDERED AND REJECTED

2. None

DETAIL (Including consultation carried out)

3. Southampton has not published a high level vision for its children and young people since the Southampton Children and Young People’s Plan 2009-2012. Southampton City Council recognises the value of having a clear and transparent vision for our children and young people that drives positive outcomes.

4. Council officers have worked with colleagues from the Clinical Commissioning Group, as well as other partners via the 0-19 Prevent and Early Intervention Board to develop initial recommendations with regards to the focus and priorities of the strategy. These recommendations have been based on the evidence included in the Joint Strategic Needs Assessment.
5. Members of the Health and Wellbeing Board will receive a presentation providing an overview of the initial proposals in the meeting 28th September 2016. Members will be asked to provide feedback on the proposed priorities, and identify activity to support the achievement of the outcomes.

RESOURCE IMPLICATIONS

Capital/Revenue

6. None

Property/Other

7. None

LEGAL IMPLICATIONS

Statutory power to undertake proposals in the report:

8. None

Other Legal Implications:

9. None

POLICY FRAMEWORK IMPLICATIONS

10. None

KEY DECISION No

WARDS/COMMUNITIES AFFECTED:	All
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SUPPORTING DOCUMENTATION

Appendices

1.	None
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Documents In Members' Rooms

1.	None
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Equality Impact Assessment

Do the implications/subject of the report require an Equality Impact Assessment (EIA) to be carried out.	No
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Other Background Documents

Equality Impact Assessment and Other Background documents available for inspection at:

Title of Background Paper(s)	Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)
NONE	

DECISION-MAKER:	HEALTH AND WELLBEING BOARD		
SUBJECT:	SUSTAINABILITY AND TRANSFORMATION PLAN 2016		
DATE OF DECISION:	28 SEPTEMBER 2016		
REPORT OF:	CHIEF OFFICER, SOUTHAMPTON CITY CLINICAL COMMISSIONING GROUP		
<u>CONTACT DETAILS</u>			
AUTHOR	Name:	John Richards	Tel: 02380 296923
	E-mail:	john.richards@southamptoncityccg.nhs.uk	
STATEMENT OF CONFIDENTIALITY			
None			

BRIEF SUMMARY

The aim of the Hampshire and Isle Of Wight (HIOW) Sustainability and Transformation Plan (STP) is to enable local health and care partners across HIOW to work at scale to realise solutions that can transform the health and wellbeing of our population. The purpose of this report is for the Health and Wellbeing Board (HWB) to give delegated approval to the Chair, as the timescale between completion and submission of the H&IOW STP to the national bodies does not coincide with a HWB meeting. A verbal report will be made at the meeting regarding the current position of the plan.

RECOMMENDATIONS:

- (i) HWB is asked to comment on the proposal to form a joint committee of the four HWBs across HIOW to provide strategic governance and oversight of the STP, and also to help ensure that the principle of subsidiarity is maintained.
- (ii) HWB is asked to make a clear commitment to debate specific issues from the STP in public in due course, in line with public consultation requirements and good governance.
- (iii) HWB is asked to give delegated authority for approval to the Chair for the STP version to be submitted by 21 October 2016.

REASONS FOR REPORT RECOMMENDATIONS

1. The HWB will play an important role in defining local priorities and overseeing delivery of the STP. Throughout the development of the HIOW STP, the principle has been established that the HIOW plan should only tackle at scale those matters that can only be resolved by working at scale, and that power should reside as locally as possible: the so-called subsidiarity principle. Governance proposals are being developed that envisage a joint committee being formed of the four HWBs across HIOW with a specific remit to undertake the wider overarching role. The specific terms of reference will need to be developed if there is support for this approach.

National feedback following the draft submission at the end of June 2016 has suggested that the STP would benefit from greater specificity about the impact/benefits of proposed changes. Work is currently underway to enable boards to make meaningful decisions. This should include clarity about the consequences of funding plans for both health and social care and assumptions about funding and capacity requirements (workforce, IT and estates) to deliver the objectives of the STP (i.e. meeting the three 'gaps' identified in the Five Year Forward View).

ALTERNATIVE OPTIONS CONSIDERED AND REJECTED

2. None

DETAIL (Including consultation carried out)

- 3 The STP steering group are working towards finalising the STP and the governance arrangements for a joint committee of HWBs to bring together the four HWBs in the STP area. The HWB have been kept informed of the STP process and progress while the plan has been in development. A verbal update will be given at the 28th September meeting.
- 4 The final STP must be submitted to national bodies by 21 October. The requirement to rapidly develop two year operating plans and contracts (by December 2016) suggests that clear and explicit sign off from local organisations (including the HWB) would facilitate a successful process. A near-final draft will be available, at the earliest, on 30th September for board approvals to begin. All approvals must be gathered by 12th October.
- 5 It is anticipated that national planning guidance will be issued before the end of September 2016. In the meantime, some guidance has now been received to suggest that STPs should be published before the end of the year and emphasising the importance of inclusive engagement throughout the process for developing plans, together with the legal requirement to consult in the event of substantive service changes.
- 6 The Board are asked to give delegated approval to the Chair of HWB, as there will not be a HWB meeting during the approval period to formally agree to the plan.

RESOURCE IMPLICATIONS

Capital/Revenue

7. None

Property/Other

8. None

LEGAL IMPLICATIONS

Statutory power to undertake proposals in the report:

9. None

Other Legal Implications:

10. None

POLICY FRAMEWORK IMPLICATIONS

11. None

KEY DECISION? No

WARDS/COMMUNITIES AFFECTED:	
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SUPPORTING DOCUMENTATION

Appendices

1.	None
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Documents In Members' Rooms

1.	None
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Equality Impact Assessment

Do the implications/subject of the report require an Equality Impact Assessment (EIA) to be carried out.	Not at this stage, but clearly the STP is intended to have a beneficial impact on equality and this will require a thorough assessment in due course.
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Other Background Documents

Equality Impact Assessment and Other Background documents available for inspection at:

Title of Background Paper(s)

Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)

1.	None	
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